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J. Matthew Zigmant

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In re: application of: Donham, Christopher D.S.

Application Number: 10/696,848

Filed:10/30/2003

Title: Flexible and Inexpensive Method For Processing High Number of Independent
Textures In A 3-D Graphics Pipeline

Atty Docket Number: 019680-003300US JMZ/lo

Being faxed to Examiner Monestime, Mackly, at facsimile number
1-571-273-8300 are the following documents:

1. This PTO/SB/97 Certificate of Transmission (1 page);
2. PTO/SB/21 Transmittal Form (1 page);
3. PTO/SB/22 Petition to Extend Time (1 page submitted in duplicate); and
4. Amendment (7 pages).

Number of pages being transmitted: 11

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PTO/SB/21 (09-04)

TRANSMITTAL FORM

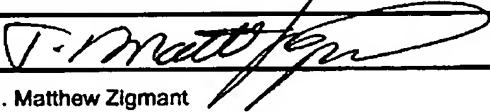
(to be used for all correspondence after initial filing)

TRANSMITTAL FORM		Application Number 10/696,848
		Filing Date October 30, 2003
		First Named Inventor Donham, Christopher D. S.
		Art Unit 2676
		Examiner Name Monestime, Mackly
Total Number of Pages in This Submission 11		Attorney Docket Number 019680-003300US

ENCLOSURES (Check all that apply)

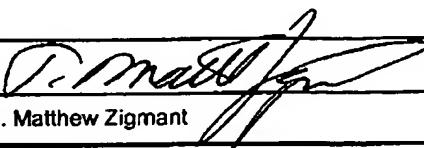
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply (7 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (1 page submitted in duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO/SB/97 Certificate of Transmission (1 page); and This Transmittal Form (1 page)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	J. Matthew Zigmant		
Date	July 19, 2005	Reg. No.	44,005

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